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## REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/632,775
Filing Date	August 1, 2003
First Named Inventor	Fiedler, Mark
Group Art Unit	
Examiner Name	
Attorney Docket Number	3215/4

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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<input type="checkbox"/> Firm or Individual Name	Mark Fiedler / Recent Memory Incorporated				
Address	160 Bleecker Street				
Address	#6JE				
City	New York				
Country	U.S.A.	State	NY	ZIP	10012
Telephone	(212) 475-4276	Fax	(413) 556-2693		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

### SIGNATURE of Applicant or Assignee of Record

Name	Mark Fiedler President, Recent Memory Incorporated
Signature	
Date	September 11, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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